

Initial Training for Family Child Care Providers Summer 2014

Presented by the Howard County Office of Children's Services

Applicants for a Family Child Care License must satisfy a series of training requirements set by the Office of Child Care. If you have questions about getting your license, required training classes, setting up your business, or another aspect of family child care, contact Joan Johnson, 410-313-1432 or jmjohnson@howardcountymd.gov.

Required Initial Training Workshops: Summer 2014 Schedule

All classes meet in the OCS training room (3300 N. Ridge Rd., Suite 360, Ellicott City MD 21043).

☐ **FCCP Community Module:**

Tuesday, July 15 / 5:45 to 9:45 p.m.

Learn about relationships with children and families.

☐ **FCCP: Child Development Module**

Monday, July 21 / 5:45 to 9:45 p.m.

Explore child development concepts, growth and development stages and learning theories.

☐ **FCCP: Curriculum Module**

Wednesday, July 23 / 5:45 to 9:45 p.m.

Create a curriculum, and design your space.

☐ **SIDS: Sudden Infant Death Syndrome**

Wednesday, July 30 / 6:30 to 8:30 p.m.

☐ **FCCP Health & Safety Module:**

Thursday, July 31 / 5:45 to 9:45 p.m.

Covers basic health, safety, and nutrition concepts, including menu planning.

☐ **FCCP: Special Needs Module**

Monday, August 11 / 5:45 to 9:45 p.m.

Explore inclusive care, the Americans with Disabilities Act, and health, behavioral, & developmental issues.

☐ **FCCP: Professionalism Module**

Monday, August 18 / 5:45 to 9:45 p.m.

Covers supervision, abuse/neglect, guidance, record keeping, marketing, contracts, policies and procedures.

☐ **Project Security Blanket:**

Wednesday, August 6 & 13 / 6:30 to 9:30 p.m.

Must attend both nights to receive a certificate

☐ **Infant/Child and Adult CPR/AED Certification:**

July 26 or August 23, 8 to 10:30 am.

☐ **First Aid Certification:**

July 26 or August 23, 10:45 a.m. to 1:15 p.m.

To register, complete the Registration Form below and mail to: Howard County Office of Children's Services, 3300 N. Ridge Rd. Suite 380, Ellicott City, MD 21043

☐ Sign me up for the Summer 2014 Initial Training Series. I am available for all workshop dates.

Name _____ Street Address _____

Phone _____ City, State, Zip _____

Email _____ Date of Birth (mm/dd/yy) _____

☐ Initial Training Series (no First Aid or CPR): Total Cost: \$180

☐ Initial Training Series (including First Aid & CPR): Total cost: \$260

For CPR and First Aid Course Registration - Choose class date: ☐ July 26 or ☐ August 23

Note: CPR class runs 8 - 10:30 a.m.; First Aid runs from 10:45 a.m. - 1:15 p.m.

PAYMENT INFORMATION: ☐ Check or money order is enclosed (payable to Director of Finance)

☐ Credit Card Number: _____ Expiration: _____ Security Code: _____

Name on Card: _____ (Billing address must match mailing address above.)

If you need this flier in an alternate format, call 410-313-1940.

To request a sign language interpreter or other accommodations to attend, call at least one week in advance.